



環境保護署
Environmental Protection Department



For ALBA Integrated Waste Solutions (HK) Ltd. ("Service Provider")

Internal Use

Application no.:

Point to Note: All items must be completed, otherwise the application may not be processed.

Application of Individual Case with referral by Registered Social Worker (Part A) Date of submission: _____	
Information of Individual Applicant	
Name: _____ (Mr/Ms/Mrs) Age: _____ HKID no.: _____ ()	
District: _____ Residential Address: _____	
Building with elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No, Please specify: _____	
Contact phone no.: (Home) _____ (Mobile) _____	
Health status: <input type="checkbox"/> Healthy <input type="checkbox"/> Physically disabled <input type="checkbox"/> Mentally disabled <input type="checkbox"/> Chronic patients <input type="checkbox"/> Others: _____	
Additional info.: <input type="checkbox"/> Suffer from natural disaster/accidents <input type="checkbox"/> Single parent family <input type="checkbox"/> New immigrant <input type="checkbox"/> Singleton elderly <input type="checkbox"/> Others: _____	
Financial situation: <input type="checkbox"/> CSSA <input type="checkbox"/> Low income <input type="checkbox"/> Others: _____	
<input type="checkbox"/> Registered social worker has explained the content of "Guidance Notes" and "Personal Information Collection Statement" to the applicant. (mandatory)	
<input type="checkbox"/> Yes <input type="checkbox"/> No Applicant is willing to participate in media interviews and coverage	
Name of organisation of registered social worker (if applicable): _____	
Name of registered social worker: _____ (Mr/Ms/Mrs) Registration no. : _____	
Contact phone no of registered social worker: _____ Fax no : _____	
Email address of registered social worker: _____	
Signature of registered social worker : _____ Organisation chop (if applicable): _____	
Application of Non-Government Organisation (NGO) (Part B) Date of submission: _____	
Name of organisation : _____	
Name of NGO representative : _____ Mr/Ms/Mrs Position : _____	
Contact phone no. : _____ Fax no. : _____	
Email address : _____	
Delivery address : _____	
Building with elevator: <input type="checkbox"/> Yes <input type="checkbox"/> No, Please specify : _____	
Service Targets: _____	
Uses of refurbished Electrical Equipment :	
<input type="checkbox"/> Distribute to service targets (the NGO should explain to the recipients the content of "Guidance Notes" and "Personal Information Collection Statement" and provide receipts to the service provider within one month)	
<input type="checkbox"/> For the use of the service targets in NGO facilities <input type="checkbox"/> For operation of the NGO	
Signature of NGO representative : _____ NGO chop : _____	
Select Electrical Equipment : (Please ✓ and circle the required type of electrical equipment. For those applications which have specified requirements on the dimensions, please indicate. However, the service provider may not guarantee on the requirements.)	
<input type="checkbox"/> LCD TV	<input type="checkbox"/> Washing machine
<input type="checkbox"/> 20 inch or below	(high water level/ low water level)
<input type="checkbox"/> 22-32 inch	(front / top load)
<input type="checkbox"/> 37 inch or above	(size : _____)
<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Window type air-conditioner
(1-door / 2-doors)	cooling capacity: _____
(size : _____)	(size : _____)
<input type="checkbox"/> Monitor	



Guidance Notes

1. Application of individual case shall be made through referral by Registered Social Worker. Individual case with referral by social worker should fill in Part A. The applicants of NGO should fill in Part B.
2. The ID number of the applicant of individual case shall be disclosed to the Service Provider to process the application and verify your identity only.
3. Due to limitation of resources, the service provider will consider the condition of the resources, but not guarantee the total number of the equipment will be allotted. All applications are processed by one time allotment. Any unsuccessful application may send the new application based on in situation of need.
4. The Refurbished Electrical Equipment available for donation includes washing machines, TVs, refrigerators, air- conditioners and monitors. The service provider will conduct inspection and testing for all electrical equipment before donation.
5. Refurbished electrical equipment are limited, please prioritize your selection in accordance with your needs.
6. All refurbished electrical equipment are second-hand products. Models, brands and age of the electrical equipment could not be selected. All electrical equipment is for own usage only and resell is not allowed. Please note that some refurbished TVs may not come with remote control. For those applications which have specified requirements on the size of the electrical equipment or cooling capacity of the air conditioner, please indicate your preference on the form. We will try our best but cannot guarantee to meet the requirements.
7. Application would be processed on first-come-first-served basis. Preference would also be given to those applicants with special needs (e.g. health status, additional information provided and financial situation etc.). Please indicate your circumstances if applicable.
8. Installation service of electrical equipment (including washing machines and TVs) will not be provided. There is one month guarantee on the electrical equipment. Please try out the electrical equipment as soon as possible. You can get our repair/replacement services during the guarantee period by calling the Service Provider (Tel: 2290-5238).
9. The service provider will arrange delivery service to for residential address/ delivery address of the success applicant.
10. The representative of NGO/ the registered social worker who signed the application form has understood and agreed to the contents of this Guidance Notes and personal information collection statement, and has confirmed all the information given in this application form is correct, complete and true.

Personal Information Collection Statement

Purpose of Collection

1. The personal data provided in this form may be used by ALBA Integrated Waste Solutions (HK) Ltd. ("ALBA-IWS") and the Environmental Protection Department ("EPD") for one or more of the following purposes:
 - (a) Activities relating to processing this application;
 - (b) Delivering services to you;
 - (c) Enquiry or complaint investigations;
 - (d) Statistical analysis;
 - (e) To facilitate communications between the collection contractor and yourself; and
 - (f) Other purposes directly relating to any of the above.
2. The provision of personal data is voluntary. If the information provided is not sufficient, we may not be able to process your application.

Transfer of Personal Data

3. ALBA-IWS and the EPD may disclose the personal data provided in this application to other persons or organisations for the purposes mentioned in paragraph 1 above.

Access and Correction of Personal Data

4. You have a right of access and correction with respect to personal data as provided for in sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance. Your right of access includes the right to obtain a copy of your personal data provided by this form. A fee may be imposed for obtaining a copy of the data.
5. Request for personal data access or correction should be made in

writing: ALBA Integrated Waste Solutions (HK) Limited,
Lots P2-P4, Eco Park, 133 Lung Mun Road, Tuen Mun Area 38,
N.T Tel: 2371 2822 Fax: 2371 3628